

State of California

Respiratory Care Board





October 24, 2003

Inquiry:

Our Imaging Department has two MRI suites. To meet the needs of ventilator patients the Anesthesia/ Surgery Department purchased an MRI-safe anesthesia system. The anesthesia system is manufactured by Datex-Ohmeda. The Anesthesiology Department claims inadequate manpower and are pushing our Respiratory Care Practitioners to provide ventilation and monitoring of the respiratory status for their intubated patients undergoing MRI. These patients would not be given anesthetic agents through the MRI system. They would instead be pre-medicated in the critical care arena prior to transport to the MRI suite and then be placed on the anesthesia system during the imaging process. If further sedation were required, it would be delivered via an intravenous route as conscious sedation. Our Medical Center currently has a policy regarding RCPs and the use of conscious sedation for the purpose of intubation by a select group of high functioning intubation certified RCPs.

From my viewpoint, this request for our staff's services could create licensure problems due to the use of a ventilator that is licensed and approved for use by physicians in the delivery of anesthetic agents. The anesthesia system is radically different that the fleet of mechanical ventilators used in our department and therefore competency in the use of a different (and rarely used machine) is also a concern. In point of fact, some RCPs have heard one anesthesiologist complain of his discomfort in using the machine due to his own unfamiliarity with this particular machine. All of the anesthesia systems in the medical center are made by Datex-Ohmeda.

I would appreciate a prompt response clarifying whether the RCP scope of practice would cover their use of an anesthesia machine being used "off label" as a ventilator.

Response:

Under the Practice Act, this equipment is neither permissible nor forbidden from use by Respiratory Therapists. A licensed Respiratory Care Practitioner can practice under the direct supervision of a physician. If the Anesthesiologist trains, certifies and supervises this "select group of high functioning RCPs" to operate this equipment, the RCPs are functioning within the boundaries of their clinical practice act.

Reference # 2002-C-42